File with: lowa Ethics and Campaign Disclosure Board 510 E. 12ⁱⁿ, Ste. 1A Des Moines, Iowa 50319

Fax: 515-281-4073

315 281-4028

FOR INSTRUCTIONS, SEE BACK OF FORM

PM 1-13

DISCLOSURE SUMMARY PAGE 10 JAN 15 PM 12: 51

as on Statement of Organization.

COMMITTEE NAME (Must be same as on Statement of Organization

Friedrichsen For Iowa [MPORTANT: Indicate by # type of committee you are reporting for:]	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (FORM DR-2 (Rev. 12/2005) DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY: Candidate Name Don C Friedrichsen Office Sought House of Repre. District (if Senate or House) House 55	For Office Use Only Comm. # 1784 Logged In Computer Computer Audited
Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code section 68B.32A(7) the and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate SIGNATURE OF PERSON FILING REPORT TELEPHONE	1/14/2DIO DATE SIGNED
I AM FILING A AM. 19, 2010 REPORT FOR (1) ELECTION /(2)N (report date) Indicate by # 2	ON-ELECTION YEAR.
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)	Committees, enter Date of Election / & Local Committees, enter County in Election is held
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the reporting posted. (T. J. L. S. W. J. C. W. J. W. J	
	• 140 A2.
of the last reporting period or must be zero if this is first report filed.)	
of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*place see in bindly be in the same as the cash on hand at the end	
of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	
of the last reporting period or must be zero if this is first report filed.)	
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COMMITTEE NAME (Must be same as on Statem	ent of Organizatio	n)
Friedrichsen	for	Iowa

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

SCHEDULE D INCURRED INDEBTEDNESS CHECK THIS BOX IF AMENDING FORM

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

(for Schedule D)

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
4-11-08	Donc Friedrichsen 1602 Hwy59 Holstein, Ia 51025	balanced owed for mileage to cardiate school	3.55
			3
			i
			•
	-		
L	TOTAL DEBTS OWED BY COMMITTEE AT	SUB-TOTAL THE END OF THIS REPORTING PERIOD	\$ 2,55 \$ 2,55
*If actual figure i	s unknown, show "estimated" beside the figure.	Pag	e

CANDIDATE COMMITTEES NOTE:

^{*}Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing or procured services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

Friedrichsen

COMMITTEE NAME(Must be same as on Statement of Organization)

L UNPAID LOANS	FROM LAST REPORTING PERIOD \$ 5600	o committee account.	AMENDING FO
I- MONETARY LO	OANS RECEIVED <u>THIS</u> REPORTING PERIOD e of loan, such as a bank, must be shown if a third party is in	volved. Include loans from candida	ate's personal funds.)
DATE RECEIVED MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$
	none		غ د د
			A .
			V ·
		TOTAL (PART I)	s O
TII - MONETARY	LOAN REPAYMENTS MADE THIS REPORTING PERIOD		*
(Loans forgive	en must be reported on Schedule E In-kind Contributions.)		
DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$
	none		
	1,, 0,, 0		
			·
l l	e de la companya de l		
		\$	1
		1	
	TOTAL CASH	REPAYMENTS (PART II)	\$
	TOTAL CASH From Schedule E TOTA		\$ 0 \$ 5600

for Iowa

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

SCHEDULE F

(Rev. 02/08)

LOANS RECEIVED |

& REPAID

☐ CHECK THIS BOX IF